

PROCESS SERVERS SUPPLEMENTAL APPLICATION

- 1) Please indicate the average number of services of process per year: _____

- 2) Counties in which applicant performs services: _____

- 3) Does the Applicant maintain a valid License or Certificate of Registration (if required by your state)? Yes____ No____

- 4) Please indicate % of revenues for services provided for the following:
Plaintiff attorneys (civil): _____%
Defense Attorneys (civil) _____%
Criminal prosecutors: _____%
Defense Attorneys (criminal) _____%
Court Appointment: _____%
Other (please describe) _____% _____

- 5) How is Applicant paid for services (per task, monthly)? _____

- 6) What steps does Applicant take when the party to be served will not grant access or takes other evasive steps to avoid in-person service? (attach a separate piece of paper if necessary): _____

- 7) Does the Applicant: provide Subpoena service? Yes____ No____
collect Affidavits from witnesses? Yes____ No____

- 8) Does Applicant have a surety bond (if required by state)? _____ If Yes, please indicate amount of bond: \$_____

- 9) Please indicate percentage of services of process upon:
 - Individuals: _____%
 - Businesses: _____%
 - Government: _____%

- 10) Please list continuing education courses/seminars completed during the past 12 months: _____

- 12) Does Applicant provide skip tracing services? Yes ____ No____

It is understood and agreed that this supplemental application shall become a part of the application for Professional Liability Errors & Omissions Insurance.

Date

Name of Applicant

Signature